Membership Application

Applicant (& Spouse) name(s): Mailing Address:	
Telephone Number:	
Email Address:	
Children's Names & Birthdates:	
Special Members:	
Occupations of Applicants:	
Interested in serving on a committee? _	Interested in swim team?
How did you learn about us?	
Signature/Bond Number of a current n	nember:
Signature of Applicants *:	
*Signature implies inte	ended compliance with all rules & regulations.
Make checks pa	yable to Sunny Willow Swim Club.
	Office Use Only
Membership Number Assignment:	Payment Date & Amount:
Sunny Willow Representative Signature	Date